

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10754618
APPLICANT(S)

FILED DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4		1				
5		1				
6	1					
7	1					
8		1				
9		1				
10	1					
11	1					
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50						
TOTAL IND.	7	1	1	1	1	1
TOTAL DEP.	26					
TOTAL CLAIMS	33					

	IND	DEP	IND	DEP	IND	DEP
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100						
TOTAL IND.	1	1	1	1	1	1
TOTAL DEP.						
TOTAL CLAIMS						